

2007 Arizona Employer Forum

For you, the employer, The Employer Forum will provide.....

- ♦ Comprehensive information from several agencies all in one location for a reasonable price.
- ♦ A better understanding of your rights and responsibilities as an employer.
- ♦ Continuing Professional Education Credit (CPE) available.

These are among the agencies invited to participate:

- ♦ Internal Revenue Service
- ◆ Arizona Department of Revenue
- ♦ Social Security Administration
- ♦ US Department of Labor COBRA

- ♦ Dept of Homeland Security Immigration
- ♦ Arizona Department of Economic Security
- ♦ Arizona Department of Commerce
- ♦ Arizona Small Business Administration

When/Where:

- ☐ Mesa October 15, Mesa Convention Center, 263 N. Center St.
- ☐ Tucson October 17, Radisson Suites Tucson, 6555 East Speedway Blvd
- ☐ Glendale October 19, Glendale Civic Center, 5750 W. Glenn Drive

The seminars are from 8:00am - 5:00pm, with a no-host lunch and a non-refundable cost of \$75.00 per person. For more information please call: (602) 716-7810 or toll free, (877) 863-0655

Registration Form

Register early -- seating is limited. You will not be mailed a confirmation letter. You may consider yourself enrolled unless we call and tell you otherwise.

Name and Seminar Information

Name #1 Name #2	Persons with a disability may request a reasonable accommodation by calling 602-716-7810. If you are hearing impaired, please call TDD: in Maricopa County, (602) 542-4021, or toll free, statewide 1-800-397-0256.	
Email Address		
Business Name		
Address		
City State ZIP Code Daytime Telephone Number ()	This document is available in an alternative format upon request.	
□Mesa – Oct. 15, Convention Center □Tucson – Oct. 17, Radisson Suites □ Glendale – Oct. 19, Glendale Civic Center		

Payment Method

Total amount due: \$	
□Check #	(payable to Community OutReach and Education) is enclosed
□By checking this box a	d affixing your signature, you are authorizing Department of Revenue
to charge your account fo	r a non-refundable seminar.
Charge to: □Visa ® 〔	IMasterCard ® Agreed amount to be charged: \$
Name as it appears on th	e credit card:
Account #	
Expiration Date	
Verification Code (last 3	t's on back of credit card)
Signature	
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Method of Registration Mail to: Community OutReach and Education, Arizona Department of Revenue, 1600 W Monroe, Phoenix, AZ 85007 Fax to: (602) 716-7985